

CLAIMS ONLY						Application Number <b>10777 732</b>	Filing Date	
						Applicant(s)		
						* May be used for additional claims or amendments		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1						51		
2		1				52		
3		1				53		
4		1				54		
5		1				55		
6		1				56		
7		1				57		
8	1					58		
9		1				59		
10		1				60		
11		1				61		
12		1				62		
13		1				63		
14		1				64		
15	1					65		
16		1				66		
17		1				67		
18		1				68		
19		1				69		
20	1					70		
21						71		
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39						89		
40						90		
41						91		
42						92		
43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
Total Indep						Total Indep		
Total Depend	←	←	←	←	←	Total Depend	←	
Total Claims						Total Claims		